BEST AVAILABLE COPY

| PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 GR 00 P 1715 | | | | | | | | | | | | | |
|---|--|---|--------------|--------------------|---------------------------------|------------------|------------|-------------------|------------------------|----------|---------------------|------------------------|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | ALL EN | | OR | OTHER SMALL E | | |
| TOTAL CLAIMS | | | 10 | | | | F | RATE | FEE | | RATE | FEE | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | ВА | SIC FEE | 355.00 | OR | BASIC FEE | 710.00 | |
| TOTAL CHARGEABLE CLAIMS | | | 10 minus 20= | | . 6 | | Ι, | (\$ 9= | | OR | X\$18= | | |
| INDEPENDENT CLAIMS | | | 2 minus 3 = | | · 45 | | | X40= | · | OR | X80= | | |
| MU | LTIPLE DEPEN | DENT CLAIM PR | RESENT | NT 🔲 | | | | +135= | | | +270= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | <u> </u> | OTAL | | OR OR | TOTAL | · · · · · · · · · | |
| CLAIMS AS AMENDED - PART II | | | | | | | | TOTALON | | | | OTHER THAN | |
| (Column 1) (Column 2) (Column 3) | | | | | | | S | MALL | ENTITY | OR . | SMALL | ENTITY | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | PREVI | HEST IBER OUSLY FOR | PRESENT EXTRA | ŀ | RATE | ADDI- TIONAL FEE | | ŔATE | ADDI- TIONAL FEE | |
| | Total | • | Minus | ** | | = | , | K\$ 9= | | OR | X\$18= | | |
| | Independent | • | Minus | *** | · · | = | | X40= | | ÓR | X80= | - | |
| | FIRST PRESE | NTATION OF MI | JLTIPLE DEF | PENDEN | TCLAIM | * * | (a) | -135= | S ₀ | OR | +270= | | |
| | | | | | | | | TOTAL | | OR | TOTAL ADDIT. FEE | | |
| | | Ąυ | DIT. FEE | | | ADDII. PEE | | | | | | | |
| AMENDMENT B | | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | NUM PREV | HEST MBER IOUSLY D FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEË | * 1 | RATÉ | ADDI- TIONAL FEE | |
| | Total | • | Minus | ** | | = | | X\$ 9= | • . | OR | X\$18= | | |
| | Independent | • | Minus | *** | | [= | | X40= | | OR | X80= | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | 1 | ⊦135= | | OR | +270= | | |
| | | | | | | | • L | TOTAL DIT. FEE | | OR | TOTAL ADDIT. FEE | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIG NUI PREV | HEST MBER TOUSLY D FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | • | Minus | ** | | = . | | X\$ 9= | | OR | X\$18= | ï | |
| | Indep ndent | | Minus | *** | IT 61 ··· | = | 11 | X40= | <u> </u> | OR | X80= | | |
| L | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +135= | | OR | +270= | 1 | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | | | TOTAL | - | |
| | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** ADDIT. FEE ** Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |

Application or Docket Number